



Chamber Member: \_\_\_\_\_

Company Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Brief Company Description:

**M2M Benefit** (Please list benefits your company will provide to Chamber Members presenting their Membership Card. Ex: 15% discount on selected items, \$10 gift card with \$100 or more purchase, free delivery etc.):

I understand that I must be a member in good standing of the Trail District Chamber of Commerce to participate in this program. I also understand that all submissions are subject to approval by the Chamber.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_